

13409 U.S. PTO  
09/22/03

## Transmittal Form w/ Declaration

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|--|--|--|--|--------------|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br>(Only for new nonprovisional applications under 37 CFR 1.53(b))   | Attorney Docket No.                            | RBC-001  | Total Pages  |              |
|  | First named Inventor or Application Identifier |  | Claude MAUFFETTE                                     |              |
|  | Title of Invention                             |  | APPARATUS FOR PACKING OBJECTS INTO AN ELONGATED TUBE |              |
| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents.  |  | ADDRESS TO: Commissioner for Patents<br>Box Patent Application<br>Alexandria, VA 22313-1450  |  |              |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form<br>2. <input checked="" type="checkbox"/> Specification [Total Pages 14]<br>- Descriptive title of the Invention<br>- Cross References to Related Applications<br>- Statement Regarding Fed sponsored R & D<br>- Reference to Microfiche Appendix<br>- Background of the Invention<br>- Brief Summary of the Invention<br>- Brief Description of the Drawings (if filed)<br>- Detailed Description<br>- Claim(s)<br>- Abstract of the Disclosure<br><br>3. <input checked="" type="checkbox"/> Formal Drawing(s) (35 USC 113) [Total Sheets 3]<br>4. <input checked="" type="checkbox"/> Oath or Declaration [Total pages 3]<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br>(for continuation/divisional with Box 17 completed)<br>[Note Box 5 below]<br>i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u><br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br><br>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked)<br>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. |  | 6. <input type="checkbox"/> Microfiche Computer Program (Appendix)<br>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Copy<br>b. <input type="checkbox"/> Paper Copy (identical to computer copy)<br>c. <input type="checkbox"/> Statement verifying identity of above copies<br><br><b>ACCOMPANYING APPLICATION PARTS</b><br>8. <input checked="" type="checkbox"/> Assignment papers (cover sheets & documents)<br>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement<br>(When there is an assignee)<br><input type="checkbox"/> Power of Attorney<br>10. <input type="checkbox"/> English Translation Document (if applicable)<br>11. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO-1449<br><input type="checkbox"/> Copies of IDS Citations (* docs)<br>12. <input type="checkbox"/> Preliminary Amendment [with Version with Markings to Show Changes Made]<br>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>14. <input type="checkbox"/> Assertion to Entitlement to Small Entity Status<br><input type="checkbox"/> Assertion filed in prior application, status still proper and desired<br>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)<br><input checked="" type="checkbox"/> Priority of application No. 2,412,431 filed on November 20, 2002, in Canada is claimed under 35 USC 119.<br><input type="checkbox"/> The certified copy has been filed in prior application Serial No. 08/*.<br>16. <input checked="" type="checkbox"/> Other: <u>Associate Power of Attorney</u><br><br><b>OTHER</b><br>17. <input type="checkbox"/> Priority of * Patent Application No. * filed * is claimed under 35 USC 119. |  |              |
| 18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in part (CIP)<br>of prior application No.: <u>09/ *</u>  |  |  |  |              |
| <b>19. CORRESPONDENCE ADDRESS</b>  |  |  |  |              |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label <u>020374</u>  |  | <input type="checkbox"/> Correspondence address below  |  |              |
| NAME   | KUBOVCIK & KUBOVCIK                            |  |  |              |
| ADDRESS  | 900 17th Street, N.W.                          |  |  |              |
| CITY   | Washington                                     | STATE  | DC   | ZIP CODE     |
| FILING DATE  | September 22, 2003                             | TEL  | 202-887-9023   | FAX          |
|  |  |  |  | 202-887-9093 |

|   |  |                        |                    |
|---|--|------------------------|--------------------|
| <b>FEE TRANSMITTAL</b><br><br>Note: Effective January 1, 2003 |  | Application Number     | Not Yet Assigned   |
|   |  | Filing Date            | September 22, 2003 |
|   |  | First Named Inventor   | Claude MAUFFETTE   |
|   |  | Group Art Unit         | Not Assigned       |
|   |  | Examiner Name          | Not Assigned       |
|   |  | Attorney Docket Number | RBC-001            |

| CLAIMS AS FILED-PART 1                             |                  |              | SMALL ENTITY |          | OTHER THAN SMALL ENTITY |          |
|--|------------------|--------------|--------------|----------|-------------------------|----------|
| FOR  | NUMBER FILED     | NUMBER EXTRA | RATE         | Fee      | RATE                    | Fee      |
| BASIC FEE<br>(37 CFR 1.16 (a))                     |                  |              |              | \$375.00 |                         | \$750.00 |
| TOTAL CLAIMS<br>(37 CFR 1.16 (c))                  | <u>18</u> - 20 = |              | \$9.00       | \$0.00   | \$18.00                 |          |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16 (B))            | <u>1</u> - 3 =   |              | \$42.00      | \$0.00   | \$84.00                 |          |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16 (d)) |                  |              | \$140.00     |          | \$280.00                |          |
|  |                  |              | SUB TOTAL    | \$375.00 | SUB TOTAL               |          |
| SURCHARGE-LATE FILING FEE OR DECLARATION           |                  |              | \$65.00      |          | \$130.00                |          |
| RECORDING ASSIGNMENT                               |                  |              | \$40.00 x 2  | \$80.00  | \$40.00                 |          |
| <b>TOTAL</b>                                       |                  |              |              | \$455.00 |                         | \$0.00   |

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|---|--|---------------------|--|--|--|--|
| <b>METHOD OF PAYMENT</b> (check one)  |  |                     |  |  |  |  |
| 1. <input checked="" type="checkbox"/> The commissioner is hereby authorized to credit overpayments or charge insufficiencies to: |  |                     |  | 2. <input checked="" type="checkbox"/> Payment Enclosed:   |  |  |
| DEPOSIT ACCOUNT No.   |  | 111833              |  | <input checked="" type="checkbox"/> Check (# _____ for \$455.00)<br><input type="checkbox"/> Money Order<br><input type="checkbox"/> Other |  |  |
| DEPOSIT ACCOUNT NAME  |  | KUBOVCIK & KUBOVCIK |  |  |  |  |

|  |   |                  |  |
|--|---|------------------|--|
| <b>SIGNATURE OF ATTORNEY, OR AGENT</b> |   |                  |  |
| NAME                                   | Keiko Tanaka Kubovcik   | REGISTRATION No. | 40,428   |
| SIGNATURE                              |  | ADDRESS          | KUBOVCIK & KUBOVCIK<br>900 17th Street, N.W.<br>Washington, D.C. 20006 |
|  |   | TELEPHONE        | 202-887-9023   |
| DATE                                   | September 22, 2003  | FAX              | 202-887-9093   |

KTK/sb